## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

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|   |  | CLAIMS AS                                 | (Colur           | mn 2)        |                                 | SMALL ENTITY TYPE |          | OR                  | OTHER THAN<br>OR SMALL ENTITY |          |                     |                        |
|---|--|---|------------------|--------------|---------------------------------|-------------------|----------|---------------------|-------------------------------|----------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | 20               |              |                                 |                   |          | RATE                | FEE                           |          | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED     |              | NUMBI                           | ER EXTRA          |          | BASIC FEE           | 370.00                        | OR       | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 21 minus 20=     |              | •                               |                   |          | X\$ 9=              | 9                             | OR       | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | ク minus 3 =      |              | *                               |                   |          | X42=                | į                             | OR       | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                  |              |                                 |                   |          | +140=               |                               | OR       | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                  |              |                                 | 1                 | TOTAL    |                     | OR                            | TOTAL    |                     |                        |
| (2/3 04 (Column 1) (Column 2) (Column 3)  |  |   |                  |              |                                 |                   | <u> </u> | SMALL E             | NTITY                         | OR       | OTHER<br>SMALL      |                        |
| AMENDMENTA  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA  |          | RATE                | ADDI-<br>TIONAL<br>FEE        |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 21                                      | Minus            | ** 0         | 21_                             | =-                |          | X\$ 9=              |                               | OR       | X\$18=              |                        |
|   | Independent                                    | * 3                                       | Minus            | ***          | 3                               | =                 |          | X42=                |                               | OR       | X84=                |                        |
| L   | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEI      | PENDEN       | T CLAIM                         |                   | ل        | +140=               |                               | OR       | +280=               | /                      |
|   |  |   |                  |              |                                 |                   |          | TOTAL<br>ADDIT. FEE |                               | OR       | TOTAL<br>ADDIT, FEE | Y                      |
| (Column 1) (Column 2) (Column 3)  |  |   |                  |              |                                 |                   |          |                     |                               |          |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUA<br>PREVI | HEST<br>MBER<br>HOUSLY<br>DFOR  | PRESENT<br>EXTRA  |          | RATE                | ADDI-<br>TIONAL<br>FEE        |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus            | nn .         |                                 | =                 |          | X\$ 9=              |                               | OR       | X\$18=              |                        |
|   | Independent                                    | •   | Minus            | ***          |                                 | -                 |          | X42=                |                               | OR       | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                   | ا لـ     | +140=               |                               | OR       | +280=               |                        |
|   |  |   |                  |              |                                 |                   |          | TOTAL<br>ADDIT. FEE |                               | OR       | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                  |              |                                 |                   |          |                     |                               |          |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREV  | HEST<br>MBER<br>NOUSLY<br>D FOR | PRESENT<br>EXTRA  |          | RATE                | ADDI-<br>TIONAL<br>FEE        |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus            | **           |                                 | =                 |          | X\$ 9=              |                               | OR       | X\$18=              |                        |
|   | Independent                                    | •   | Minus            | ***          |                                 | <u> -</u>         | 41       | X42=                |                               | OR       | X84=                |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                   |          | +140=               |                               | OR       | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                  |              |                                 |                   |          |                     | OR                            | TOTAL    |                     |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |              |                                 |                   |          |                     |                               |          |                     | <u> </u>               |
|   | The "Highest Nur                               | nber Previously Pa                        | aid For (Total o | ndepen x     | dent) is th                     | e uignest unm     | DEL 10   | កបច ម សម ទង់        | nobirgre og                   | A 411 CA |                     |                        |